Family Medicine Clerkship Learning Objectives

GENERAL INFORMATION

Course Details & Information
- Course Name: Family Medicine
- Course Number: 17/R – DO 3102
- Graduating Class Year: 2019
- Discipline: Clinical
- Course Option Type: Required

Course Administration & Duration
- Department: Family & Internal Medicine
- Method: 1 on 1 interaction
- Director: Bret Ripley, DO
- Credit Hours: 4.0
- Dates: July 31, to May 21, 2018

ROLES & SUPPORT

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-Director</td>
<td>Bret Ripley, DO</td>
<td><a href="mailto:Bret.Ripley@dmu.edu">Bret.Ripley@dmu.edu</a></td>
<td>515-271-1546</td>
</tr>
<tr>
<td>Academic Assistant</td>
<td>Ella Henderson</td>
<td><a href="mailto:Ella.henderson@dmu.edu">Ella.henderson@dmu.edu</a></td>
<td>515-271-1680</td>
</tr>
</tbody>
</table>

General Course Description

Required Rotation
This Core 3rd year Clerkship rotation within the College of Osteopathic Medicine includes 2 four-week sessions or eight (8) continuous weeks in a structured, predominantly ambulatory experience intended to develop the student’s decision-making and cognitive skills, and to apply didactic material in a clinical setting.

Elective Rotation
The elective rotation in Family Medicine is a four (4) week rotation during which the student will be given opportunities to further develop clinical skills as described for the required rotation. Most students electing to take this rotation will be in the fourth year of osteopathic medical school.
Course Goals, Objectives & Competencies

A major goal of this rotation is to impress upon students the contexts in which a family medicine physician provides care for both acute and chronic illness while emphasizing the value of prevention and wellness. Students are expected to assist in the management of adult, pediatric and geriatric patients. The student will also be given opportunities to perform basic procedures, among them OMT, collection of vaginal specimens and Pap smears, performance of breast, rectal and bimanual examinations, suturing simple lacerations, splint and simple cast application, treatment of verrucae, and skin lesion removal. In select settings, the student may be exposed to more complex procedures such as upper and lower endoscopy, colposcopy, or nasal endoscopy.

Objectives have been formulated with the goal of incorporating the seven Core Competencies of the Osteopathic Profession. It is assumed that appropriate increases in knowledge, skills and attitude/awareness will take place to improve mastery of these competencies. By the end of the Family Medicine clerkship, students will be able to meet the following objectives:

Principles

There are five principles of Family Medicine that define our profession and guide care given to our patients:

- **Biopsychosocial Model (Patient-Centered)**
  - Family Medicine is based on a biopsychosocial model that is patient-centered and teaches students to approach patients with sensitivity and responsiveness to culture, age, gender, and disabilities and develops their ability to collect and incorporate appropriate psychosocial, cultural, and family data into patient-centered management plans.

- **Comprehensive Care (Whole Person Care)**
  - Family Medicine emphasizes the importance of caring for the whole person by providing opportunities for students to participate in longitudinal, integrated, preventive services and treatment of common acute and chronic medical problems for patients and families in all phases of the life cycle.

- **Continuity of Care (Continuous Health Relationships)**
  - Family Medicine values and promotes continuous healing relationships by providing a personal medical home for patients and their families and maintaining ongoing responsibility for the health care of patients and families and facilitating transitions between the primary care provider, referral agencies, and consultants.

- **Context of Care (Evidence-Based)**
  - Family Medicine emphasizes the development of patient- and family-centered treatment plans that are evidence-based, safe, and designed to produce high-quality results that enhance functional outcome and quality of life in a culturally responsive manner.

- **Coordinator/Complexity of Care (Integration)**
  - The family physician functions as the integrator of complex care and collaborates as a health care team member in disease management, health promotion, and patient education.

<table>
<thead>
<tr>
<th>Skills linked to Entrustable Professional Activities (EPAs)</th>
<th>AOA/AACOM Competencies</th>
<th>Course Objectives</th>
<th>Assessment Types</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA 1,2,3</td>
<td>II.1.b II.1.c II.1.d II.1.e II.1.f II.1.g II.1.h II.1.i II.1.j</td>
<td>Be able to recognize the signs and symptoms, differential diagnosis, management and treatment of the diseases and medical conditions in the FM Cases</td>
<td>Exam - Nationally Normed/Standardized, Subject</td>
</tr>
<tr>
<td>EPA 6,9</td>
<td>III.6.f III.6.g III.6.h IV.3.a IV.3.b IV.4.a IV.4.b IV.4.c IV.4.d IV.4.e IV.4.f IV.4.g IV.4.h IV.4.i IV.4.j IV.4.k IV.4.l IV.4.m VII.2.a VII.2.b</td>
<td>Collaborate with other health care professionals to provide patient-centered care</td>
<td>Multisource Assessment Participation</td>
</tr>
<tr>
<td>EPA 8,9</td>
<td>III.6.f III.6.g III.6.h IV.3.a IV.3.b IV.4.a IV.4.b IV.4.c IV.4.d IV.4.e IV.4.f IV.4.g IV.4.h IV.4.i IV.4.j IV.4.k IV.4.l IV.4.m VII.2.a VII.2.b</td>
<td>Demonstrate effective communication with patients, families and other health care professionals</td>
<td>Clinical Performance Rating/Checklist Participation</td>
</tr>
<tr>
<td>EPA 13</td>
<td>V.2.a V.2.c</td>
<td>Demonstrate respect for patients and their families both inside and outside of care facilities</td>
<td>Clinical Performance Rating/Checklist Oral Patient Presentation Participation</td>
</tr>
<tr>
<td>EPA 7</td>
<td>II.3.f II.3.g III.5.a III.5.b III.5.c III.5.d III.5.e III.5.f III.5.g</td>
<td>Recognize the impact of cultural diversity on health promotion and disease prevention issues at the individual and community levels</td>
<td>Clinical Performance Rating/Checklist Oral Patient Presentation Portfolio-Based Assessment</td>
</tr>
<tr>
<td>EPA 6,7</td>
<td>V.1.e V.7.a V.7.c</td>
<td>Evaluate the impact of ethnicity, socioeconomic factors and environment on adherence to treatment plans and lifestyle changes</td>
<td>Clinical Performance Rating/Checklist Oral Patient Presentation Portfolio-Based Assessment</td>
</tr>
<tr>
<td>EPA 8,9</td>
<td>I.7,a-d; III. 6, a-l; IV.3, a-b, 4, a-n</td>
<td>Experience continuity of patient care in a community setting</td>
<td>Clinical experience–ambulatory, service learning activity Participation, Multi-source assessment</td>
</tr>
<tr>
<td>EPA 9</td>
<td>II. 3, f-g; III. 5, a-g; VIII.1-10</td>
<td>Formulate health maintenance and patient education activities</td>
<td>Self-directed learning, demonstration Portfolio-based assessment, Clinical documentation review</td>
</tr>
</tbody>
</table>
Family Medicine Clerkship Learning Objectives
DO Class of 2019

RESOURCES

Required Texts & Assignments
Clinical Clerkship in Inpatient Medicine by Saint, Lippincott Williams & Wilkins 3rd Edition 2010

Students are Required to complete 40 assigned MedU FM cases by the last day (Friday) of your 2nd four-week Family Medicine Rotation. The Family Medicine Department Clerkship Director and Academic assistant will electronically monitor student progress and verify that all cases have been completed by the end of the student's last week of rotation.

These are interactive web based cases and you will be required to devote 120 minutes or more to review and complete. Failure to complete any FMCases will result in an immediate failure of the Family Medicine Rotation. Each FMCase can be remediated by turning in an acceptable 2-page paper for each missed case. Guidelines on acceptable will be provided to those who fail to complete their cases. See "Instructions" below for viewing FMCases.

Instructions for Registering with MedU for FM Cases
1. FM Cases are run by i-InTime and Med-U just as are the WISE-MD (surgery) and CLIPP (peds) cases. If you have previously registered for either of these, you do NOT need to register again. You will use the same user name and password for all modalities. If you have not previously registered, please continue to #2.
2. Go to the Med-U Homepage (www.meduapp.com).
3. Select 'FM Cases'.
4. Select 'Go to Cases'.
5. Click the 'First Time User' tab on the right-hand side of the screen margin.
6. Follow the prompts to complete your registration.
7. Because institutional access is controlled by email domain, you must use your institutional email address when registering (dmu.edu) Your email address will then become your log-in. Also as a student, you select your own password when registering.
8. Review and accept the FM Cases Site User Terms and Conditions. Type the security password which appears in the lower window. Select Send.
9. Expect to receive an email with a link to confirm your registration. By clicking on this link you will finalize the registration process. (These emails could be from CASUS or i-In Time. Please be sure to OPEN and complete any instructions these emails could contain.)

Supplemental readings may be assigned to address diseases and disorders of patients seen during clinic hours. During this rotation, the student must make continuing efforts to review and understand all material listed in order to be adequately prepared for licensure examinations and college evaluations and must do so by all means available.

ACADEMIC CLERKSHIP POLICIES
For required courses in the DMUCOM curriculum, DMU students must follow the requirements outlined in the FM Learning objectives. DMU considers osteopathic medical student education a participatory activity. Student attendance and participation in scheduled DMUCOM courses is expected and can be used in faculty's assessment of
student performance. The college supports and understands the right of the faculty to expect student attendance and participation in many curricular components and the need to impose consequences if those expectations are not met. Please refer to Clinical Years handbook to address the following:

**Excuse Absence**

**Emergencies:**

**When there is Advance Notice of Absence:**
- Conferences, Conventions, Meetings, College Sponsored Activities

**Extended Absences**

**DMU Computer-Based Testing Policy**

1. Students are expected to arrive 15 minutes before the scheduled start time of the examination.
2. If a student arrives after that time, or if an examination is missed, please proceed to the excused absence portion of this document.
3. Students are only allowed to possess his or her testing device, computer mouse and mouse pad, keys, writing utensils, power cord, battery power pack, device charger and soft earplugs at his or her seat.
4. Students are not permitted to bring into the room or access any unauthorized items during the examination, which include, but are not limited to: cell phones, earphones, books, notes, hats, food, drinks (other than water), purses, backpacks, etc.
5. Nothing may be worn on an examinee’s head other than for religious purposes.
6. All personal belongings, except coats, are strictly prohibited from the examination room and must be left outside or in a designated holding area until the test is completed.
7. All items provided by the exam administration staff must be returned after the examination, including all scratch paper (used or unused).
8. Any exceptions to this rule will require documentation of need from the CTL.

**Academic Integrity:**

a. All students must adhere to the policy listed above and any additional instructions provided by the exam administration staff. A failure to do so may be considered a violation of DMU and DMUCOM policies on academic integrity, and may result in disciplinary actions up to and including receiving no credit for the examination, being required to end the examination immediately, and/or sanctions imposed as outlined in the “Medical Students Rights and Responsibilities” document, including dismissal from the College.

**POST-ROTATION EXAMINATION AND EVALUATIONS**

Des Moines University Department of Family Medicine will require a mandatory, comprehensive examination for students completing their required Family Medicine clerkship rotation(s) during Year 3. You must take the COMAT examination during the last week of the 1st four-week block of the Family Medicine rotation, and it must be completed the last Thursday or Friday of the rotation. Passing score for the initial examination is 80. A separate document posted in the Clerkship website will review how the test will be administered.

COMAT breakdown [http://www.nbome.org/comat-fm.asp?m=can](http://www.nbome.org/comat-fm.asp?m=can)

**Remediation:** if a student fails the initial examination, a retake examination will be available. The student is to notify the Family Medicine academic assistant of failure of the post rotation examination within 48 hours of failure in order to arrange a retake examination. Students taking the remediation examination must score 80 in order to pass. The retake is to be taken within 2 weeks of the initial examination date. Those failing the retake will be required to complete an oral examination administered by at least two members of the DMU Family Medicine faculty. The student will need to notify the Clerkship Director and academic assistant immediately following the failure of the retake examination so that an oral examination may be scheduled at DMU. The final examination grade will be
determined by the Department of Family Medicine at the completion of the oral examination. The student is responsible to make all arrangements, including the scheduling of the examination time with the Department of Family Medicine; scheduling time away from their rotation that they are presently on; and travel expenses. The oral examination will be video-taped.